

STATEMENT OF ECONOMIC INTERESTS

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COVER PAGE
2011 FEB 25 AM 11:50



FEB 24 2011

JP

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
WRIGHT RODERICK DEVON

1. Office, Agency, or Court

Agency Name

CALIFORNIA STATE LEGISLATURE

Division, Board, Department, District, if applicable

STATE SENATE, 25TH DISTRICT

Your Position

SENATOR

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is
I certify under penalty of perjury under the laws of the State of California that

Date Signed FEBRUARY 22, 2011
(month, day, year)

Signature

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name <div style="text-align: center;">Roderick D. Wright</div>

► STREET ADDRESS OR PRECISE LOCATION
868 Glenway Drive
CITY
Inglewood, CA 90302

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:
____/____/10 ____/____/10
ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Micha Green
Wanda Sanders

► STREET ADDRESS OR PRECISE LOCATION
4556 Don Milagro Drive
CITY
Los Angeles, CA 90008

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
____/____/10 ____/____/10
ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* _____
ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF LENDER _____
INTEREST RATE _____ TERM (Months/Years) _____
_____% ☐ None
HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER* _____
ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF LENDER _____
INTEREST RATE _____ TERM (Months/Years) _____
_____% ☐ None
HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

► STREET ADDRESS OR PRECISE LOCATION
7627 S. Dalton Avenue

CITY
Los Angeles, CA 90047

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000 _____ / _____ / 10

☐ \$10,001 - \$100,000 _____ / _____ / 10

☒ \$100,001 - \$1,000,000 ACQUIRED DISPOSED

☐ Over \$1,000,000

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____

Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000

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SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION _____

CITY _____

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000 _____ / _____ / 10 _____ / _____ / 10

☐ \$10,001 - \$100,000 ACQUIRED DISPOSED

☐ \$100,001 - \$1,000,000

☐ Over \$1,000,000

NATURE OF INTEREST

☐ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____

Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

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NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)

_____% ☐ None _____

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE	TERM (Months/Years)
_____ % <input type="checkbox"/> None	_____

HIGHEST BALANCE DURING REPORTING PERIOD

☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments:

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Roderick D. Wright

<p>► NAME OF SOURCE <u>California Democratic Party</u> ADDRESS (Business Address Acceptable) <u>1401 21st Street, Suite 200</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Sacramento, CA 95811-5221</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>01 / 11 / 10</td> <td>\$ 88.79</td> <td>Sen. Caucus retreat</td> </tr> <tr> <td>12 / 05 / 10</td> <td>\$ 170.57</td> <td>Sen. Caucus dinner</td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	01 / 11 / 10	\$ 88.79	Sen. Caucus retreat	12 / 05 / 10	\$ 170.57	Sen. Caucus dinner	/ /	\$		<p>► NAME OF SOURCE <u>Family Winemakers of California</u> ADDRESS (Business Address Acceptable) <u>520 Capitol Mall, Suite 260, Sacramento, CA 95814</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>01 / 25 / 10</td> <td>\$ 79.98</td> <td>food & beverage</td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	01 / 25 / 10	\$ 79.98	food & beverage	/ /	\$		/ /	\$	
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<p>► NAME OF SOURCE <u>Pacific Gas and Electric Company</u> ADDRESS (Business Address Acceptable) <u>1415 L Street, Suite 280, Sacramento, CA 95814</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>01 / 19 / 10</td> <td>\$ 159.37</td> <td>Dinner at Morton's</td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	01 / 19 / 10	\$ 159.37	Dinner at Morton's	/ /	\$		/ /	\$		<p>► NAME OF SOURCE <u>CalChamber</u> ADDRESS (Business Address Acceptable) <u>1215 K Street, Suite 1400, Sacramento, CA 95814</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>10 / 06 / 10</td> <td>\$ 22.99</td> <td>Lunch</td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> <tr> <td> / / </td> <td>\$</td> <td></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	10 / 06 / 10	\$ 22.99	Lunch	/ /	\$		/ /	\$	
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Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Roderick D. Wright

▶ NAME OF SOURCE <u>Roll International Corporation</u> ADDRESS (Business Address Acceptable) <u>11444 West Olympic Boulevard, Los Angeles 90064</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>12 / 15 / 10</u></td> <td><u>\$ 12.00</u></td> <td><u>Holiday Gift Box</u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>12 / 15 / 10</u>	<u>\$ 12.00</u>	<u>Holiday Gift Box</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>
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Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**
- **You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.**

▶ NAME OF SOURCE <u>California Independent Voter Project</u>	
ADDRESS (Business Address Acceptable) <u>2350 Kerner Boulevard, Suite 250</u>	
CITY AND STATE <u>San Rafael, CA 94901</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): <u>11 / 14 / 10</u> - <u>11 / 18 / 10</u> AMT: \$ <u>1,792.30</u> (If applicable)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>accommodations, meal and beverages, in connection with making a speech</u>	

▶ NAME OF SOURCE <u>CA Cable & Telecommunicatons Association</u>	
ADDRESS (Business Address Acceptable) <u>1001 K Street, 2nd Floor</u>	
CITY AND STATE <u>Sacramento, CA 95814</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): <u>11 / 15 / 10</u> - ____ / ____ / ____ AMT: \$ <u>186.11</u> (If applicable)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>Dinner</u>	

▶ NAME OF SOURCE <u>Legislative Leadership Institute</u>	
ADDRESS (Business Address Acceptable) <u>721 Cardinal Lane , Suite 105</u>	
CITY AND STATE <u>Green Bay, Wisconsin 54313</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): <u>12 / 07 / 10</u> - <u>12 / 17 / 10</u> AMT: \$ <u>14,861.30</u> (If applicable)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>prog. expenses-airfare, hotel, tuition, meals and beverages</u>	

▶ NAME OF SOURCE <u>Legislative Black Caucus Policy Institute</u>	
ADDRESS (Business Address Acceptable) <u>5429 Madison Avenue</u>	
CITY AND STATE <u>Sacramento, CA 95841</u>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
DATE(S): <u>10 / 26 / 10</u> - ____ / ____ / ____ AMT: \$ <u>1,488.50</u> (If applicable)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
DESCRIPTION: <u>lodging, meals in conjunction with the CLBC Institute Legislative Seminar & Pebble Beach event</u>	

Comments: _____